BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number 10/550270				
	-	CLAIMS	(Column 1) (Column 1)			(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN		
U.S. NATIONAL STAGE FEES							1	RATE	FEE	7	RATE	F	EE
BASIC FEE			SMALL ENT. = \$ 150		LAF	GE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	4//	lu)
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			other situations = -	1	EXAM. FEE		†	EXAM. FEE	2/	177
SEARCH FEE			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All o	other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	30	OW
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≐		X \$ 125 =		1	X \$ 250 =	1	
TOTAL CHARGEABLE CLAIMS			24 m	inus 20 =	•	G		X \$ 25 =		OR	X \$ 50 =	3.0	2
INDEPENDENT CLAIMS			∫ n	ninus 3 =	•			X \$ 100 =		OR	X \$ 200 =		
MULTIPLE DEPENDENT CLAIM PRE			ESENT					+ \$ 180 =		OR	+ \$ 360 =	\vdash	
* 11	the difference	e in column 1 is	ess than zero, enter "0" i			olumn 2	2 .	TOTAL		OR	TOTAL	18	10
9	CLAIMS AS AMENDED - PART II G-73-0 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIOUS PAID F		JSLY EXTRA		RATE	TIONAL FEE		. RATE .	TIO	_
	Total	. 22	Minus	-20	5	=		X \$ 25 =		OR	X \$ 50 =	1	
	Independent	. 1	Minus	***	3	=		X \$ 100 =	-	OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
-								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	•	(Column 1)	t	(Colum	n 21	(Column 3)							
AT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F		ST PRESENT SLY EXTRA		RATE	ADDI- TIONAL FEE		RATE	AD TIOI FE	VAL
AMENDMENT	Total		Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	independent		Minus	***				X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						T.	+ \$ 180 =	•	OR	+ \$ 360 =		
							1	OTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
the entry in column 1 is tess than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".													
	ine "Highest Num	ber Previously Paid	For" (Total or Inde	ependent) is	the higi	hest number found t	n lhe	appropriate box	in column 1.				